

(ISSUE SLIP STAPLE AREA (for additional cross references))

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>H. A. 12</i>		<i>06-15-01</i>
O.I.P.E. CLASSIFIER		<i>19</i>	<i>6280</i>
FORMALITY REVIEW	<i>T. A.</i>	<i>J. C. K. Y.</i>	<i>07/25/01</i>
RESPONSE FORMALITY REVIEW	<i>1/8</i>	<i>5C.906</i>	<i>10/29/01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
÷ Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓		
2	✓		
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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